



Independent Clinical Assessment for Children's Mental Health Rehabilitative Services

Department of Medical Assistance Services
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Fact Sheet

Authority	<p>The Department of Medical Assistance Services (DMAS), as the sole State agency under State and federal authority with the responsibility of administering the Medicaid program, implemented an independent assessment process contracted through the Community Service Boards (CSBs) in July 2011. The process included an evaluation of the clinical necessity for children's mental health services. The objectives of the independent clinical assessment are to improve the care of children who are accessing mental health services, ensure appropriate utilization of services, measure outcomes and increase the cost effectiveness of services provided.</p>
Justification	<ul style="list-style-type: none">• Significant increases in utilization and expenditures for CMHRS services in recent years necessitated an additional level of review. The largest growth was in the children's services such as intensive in-home and therapeutic day treatment services.• Internal review and a federal audit results for CMHRS, provided by Medicaid enrolled providers to Medicaid enrollees, identified potential areas for improvement to the Department's service provision, service authorization, care coordination, and reimbursement policies.• Desire to educate and inform parents/legal guardians of all behavioral health service options for their children and to provide parents/legal guardians freedom of choice and access to the appropriate providers.
Benefits	<ul style="list-style-type: none">• Standardized clinical assessments performed by a Licensed Mental Health Professional helps to determine most appropriate, medically necessary mental health services;• The DMAS Service Authorization Contractor will continue to review the treatment requests, and the additional level of review helps to ensure the "Right care at the right time by the right provider" for the child;• The process helps to inform and empower parents/legal guardians to understand service options for their children and to promote their freedom of choice of qualified providers;• The independent assessment provides an opportunity to coordinate linkages between the primary care system, the health plans and the behavioral health care delivery system to address comprehensive needs of the child; and• Medicaid enrolled providers are provided additional experience with the application of medical necessity criteria to assure services to eligible children.
Status	<ul style="list-style-type: none">• As of February 2012, over 20,000 independent assessments had been completed.• The services that were recommended most frequently were TDT, Outpatient Psychiatry/Medical Evaluation, and non-physician Outpatient Counseling. A small percentage of children did not qualify for any professional service.• Utilization of higher intensive services such as IHH and TDT is trending downward since July 2011.
Performance Review	<ul style="list-style-type: none">• DMAS satisfaction phone survey results indicate 88% of families report being very satisfied with the process. Ninety-nine (99) percent of all contacts reported being somewhat satisfied or above.• As of February 2012, wait times exceeding the timeliness standards are less than 1% of all appointments.• The average no show rate since July 2011 is 26%, with the highest percentage occurring in December 2011 at 47%. There were 385 fewer no show appointments in February 2012 than in October 2011.• Data suggests access to recommended services are distributed fairly across the provider network.• DMAS continues to review and approve provider marketing plans to support families' freedom of choice and access to appropriate behavioral health providers.
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